



Schedule B/R Beneficiary/Remaindermen

2011

NAME OF ESTATE OR TRUST

ESTATE OR TRUST EMPLOYER IDENTIFICATION NUMBER

NAME OF BENEFICIARY/REMAINDERMAN

BENEFICIARY'S/REMAINDERMAN'S IDENTIFICATION NUMBER

MAILING ADDRESS OF BENEFICIARY/REMAINDERMAN CITY/TOWN/POST OFFICE STATE ZIP + 4

LEGAL DOMICILE (STATE) Select applicable oval: Beneficiary Remainderman

Total income Percentage of income Percentage of taxable income

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Income Summary

1	Accumulated income	1	
2	Total of beneficiaries' income	2	
3	Accumulated capital gain	3	
4	Total remaindermen's income	4	